

New Jersey Domestic Violence Civil Complaint and Temporary Restraining Order							Page 1 of 6 N.J.S.A. 20:25-17 et seq.
<input checked="" type="checkbox"/> TRO <input type="checkbox"/> Amended TRO		Superior Court, Chancery Division, Family Part, County		<input checked="" type="checkbox"/> Municipal Court of WEST ORANGE TOWN			
Docket Number		Police Case Number 21021279		Plaintiff's Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Plaintiff's Date of Birth 12/21/1955	
In the Matter of Plaintiff (Victim) Redacted				Defendant's Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female		Race CAUCASIAN	
Defendant Information		Last Name SEBROW	First Name BETTY	Initial I	Date of Birth 02/01/1964	Height 5 02	Weight
AKA		Defendant's Social Security Number			Eye Color HAZEL		
Home Address 12 BEECHWOOD DRIVE		City LAWRENCE	State NY	Zip 11559	Hair Color		
Home Phone Number (516)849-5863		Work Phone Number			Distinguishing Features (Scars, Facial Hair, Etc.)		
Employer				Driver's License Number			
Work Address				State		Driver's License Expiration Date	
The undersigned complains that said defendant did endanger plaintiff's life, health or well being (give specific facts regarding acts or threats of abuse and the date(s) and time(s) they occurred; specify any weapons):							
ON (Date) 07/14/2021	AT (Time) 09:21 AM	BY (Details; specify any weapons) Redacted STATES THAT IN THE FALL OF 2018, HE BEGAN A DATING RELATIONSHIP WITH MS. BAILA SEBROW. AFTER APPROXIMATELY 6 TO 8 WEEKS OF DATING, Redacted ADVISED MS. SEBROW THAT HE WISHED TO END THE RELATIONSHIP. SHORTLY AFTERWARDS Redacted STATES MS. SEBROW BEGAN TO SEND NUMEROUS TEXT MESSAGES WHICH CONTAINED VULGAR AND SEXUALLY EXPLICIT LANGUAGE, Redacted STATES HE INFORMED MS. SEBROW THAT HE NO LONGER DESIRED TO HAVE ANY FURTHER COMMUNICATION BETWEEN THE TWO.  Redacted SINCE 2018, Redacted STATES THAT ON NUMEROUS OCCASIONS, MS. SEBROW HAS SENT TEXT MESSAGES AND EMAILS IN WHICH SHE FALSELY ACCUSES Redacted AS BEING A RAPIST WITH MULTIPLE FEMALE VICTIMS. MS. SEBROW HAS THREATENED TO INFORM Redacted'S EMPLOYER OF THESE FALSE ALLEGATIONS. Redacted STATES MS. SEBROW HAS CONTACTED HIS FEMALE FRIENDS AND ASSOCIATES, IN AN ATTEMPT TO GATHER INFORMATION REGARDING HIS PAST SEXUAL HISTORY. Redacted ALSO STATES THAT HE HAS SEEN MS. SEBROW PRESENT AT THE SAME RELIGIOUS EVENTS HE ATTENDS. HE STATES THAT MS. SEBROW WOULD TYPICALLY NOT TAKE PART IN THESE GATHERINGS, BUT BELIEVES SHE DOES SO BECAUSE SHE IS AWARE HE WILL BE IN ATTENDANCE.  RECENTLY, Redacted STATES CONTACT WITH MS. SEBROW HAS BEEN SPARSE AND INFREQUENT, BUT STATES HE HAS RECEIVED TEXT MESSAGES FROM UNKNOWN PHONE NUMBERS, CONTAINING SIMILAR CONTENT TO THE MESSAGES LEFT BY MS. SEBROW Redacted BELIEVES MS. SEBROW IS USING THESE UNKNOWN PHONE NUMBERS TO CONTINUE THE HARASSING COMMUNICATION.  Redacted OFTEN SEARCHES HIS NAME ON GOOGLE TO SEE IF ANYTHING HAS BEEN WRITTEN ABOUT HIM. RECENTLY THROUGH GOOGLE'S SEARCH ENGINE, Redacted DISCOVERED A TWITTER ACCOUNT TITLED Redacted AND THE ISSUES OF DATE RAPE WITH THE TWITTER HANDLE NAMED "Redacted DATERAPE". IN THE DESCRIPTION OF THE ACCOUNT, THE FOLLOWING IS WRITTEN: 'Redacted , A 64 YEAR OLD FINANCIAL ADVISOR IN WEST ORANGE, NJ IS ACCUSED BY POLICE OF INCAPACITATING 100S OF VICTIMS BY PLYING THEM WITH DATE RAPE DRUGS.' Redacted IS FEARFUL THAT HIS REPUTATION IS BEING SLANDERED DUE TO THESE CONSTANT FALSE ALLEGATIONS.					
which constitute(s) the following criminal offense(s): (Check all applicable boxes. Law Enforcement Officer: Attach N.J.S.P. UCR DV1 offense report(s))							
<input type="checkbox"/> Homicide	<input type="checkbox"/> Terroristic Threats	<input type="checkbox"/> Criminal Restraint	<input type="checkbox"/> Sexual Assault	<input type="checkbox"/> Lewdness	<input type="checkbox"/> Burglary	<input checked="" type="checkbox"/> Harassment	
<input type="checkbox"/> Assault	<input type="checkbox"/> Kidnapping	<input type="checkbox"/> False Imprisonment	<input type="checkbox"/> Criminal Sexual Contact	<input type="checkbox"/> Criminal Mischief	<input type="checkbox"/> Criminal Trespass	<input type="checkbox"/> Stalking	
<input type="checkbox"/> Criminal Coercion	<input type="checkbox"/> Robbery	<input type="checkbox"/> Contempt of a DV Order	<input type="checkbox"/> Any Other Crime Involving Risk of Death or Serious Bodily Injury			<input type="checkbox"/> Cyber Harassment	
1. Any prior history of domestic violence reported or unreported? If Yes, explain:				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
2. Does Defendant have a criminal history? (If Yes, submit any available criminal history report)				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
3. Any prior or pending court proceedings involving parties? (If Yes, enter docket number, court, county, state)				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
4. Has a criminal complaint been filed in this matter? (If Yes, enter date, docket number, court, county, state)				<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
5. If Law Enforcement Officers responded to a domestic violence call: Were weapons seized? If Yes, describe: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was Defendant arrested? If Yes, describe: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
6. (A) The Plaintiff and Defendant are 18 years old or older or emancipated and are: (select one) <input type="checkbox"/> Married / Civil Union <input type="checkbox"/> Divorced <input type="checkbox"/> Present Household Member <input type="checkbox"/> Was at Any Time a Household Member OR (B) The Defendant is 18 years old or older or emancipated and Plaintiff and Defendant are: (select one) <input type="checkbox"/> Unmarried <input type="checkbox"/> Co-Parents <input type="checkbox"/> Expectant Parents <input checked="" type="checkbox"/> Plaintiff and Defendant have had a dating relationship							

Docket Number	Defendant's Name <b>BETTY SEBROW</b>			
7. Where appropriate list children you have with the Defendant, if any (include name, sex, date of birth, person with whom child resides)				
Child's Name: Last	First	M.I.	Sex	Birth Date
Resides _____				
8. The Plaintiff and Defendant: <input type="checkbox"/> Presently; <input type="checkbox"/> Previously; <input checked="" type="checkbox"/> Never: Resided Together				
<input type="checkbox"/> Family Relationship: What is your relationship to the defendant? _____ (Specify) _____				
<b>Certification</b>				
I certify that the foregoing responses made by me are true. I am aware that if any of the foregoing responses made by me are willfully false, I am subject to punishment.				
07/15/2021 Date		Redacted Signature of Plaintiff		

**NOTICE TO DEFENDANT:** A violation of any of the provisions listed in this order may constitute either civil or criminal contempt pursuant to N.J.S.A. 2C:25-30 and may result in your arrest, prosecution, and possible incarceration, as well as an imposition of a fine or jail sentence. Only a court can modify any of the terms or conditions of this court order.

Docket Number	Defendant's Name <b>BETTY SEBROW</b>
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**Part 1 - RELIEF - Instructions: Relief sought by Plaintiff****DEFENDANT:**

TRO FRO TRO Granted

1.  N/A  You are prohibited from returning to the scene of violence.
2.    You are prohibited from future acts of domestic violence.
3.    You are barred from the following locations:  Residence(s) of Plaintiff  Place(s) of employment of Plaintiff  
 Other (Only list addresses known to Defendant):
4.    You are prohibited from having any oral, written, personal, electronic, or other form of contact or communication with Plaintiff.  
   Other(s): **Redacted**
5.    You are prohibited from making or causing anyone else to make harassing communications to Plaintiff  
   Other(s) - Same as item 4 above or list names:
6.    You are prohibited from stalking, following or threatening to harm, stalk or follow Plaintiff  
   Other(s) - Same as item 4 above or list names:
7.   You must pay emergent monetary relief to (describe amount and method):  
  Plaintiff:  
  Defendant(s):
8.   You must be subject to intake monitoring of conditions and restraints:  
  Other (evaluations or treatment - describe):
9.   Psychiatric evaluation:
10.    **Prohibition Against Possession of Weapons:** You are prohibited from possessing any and all firearms or other weapons and must immediately surrender these firearms, weapons, permit(s) to carry, application(s) to purchase firearms and firearms purchaser ID card to the officer serving this Court Order. Failure to do so may result in your arrest and incarceration.

**PLAINTIFF:**

11.   You are granted exclusive possession of (list residence or alternate housing only if specifically known to defendant):
12.   You are granted temporary custody of:
13.   Other relief for - Plaintiff:  
  Other relief for - Children:

**LAW ENFORCEMENT OFFICER:**

You are to accompany to scene, residence, shared place of business, other (indicate address, time, duration and purpose):

  Plaintiff:  Defendant:

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Docket Number	Defendant's Name <b>BETTY SEBROW</b>																				
<b>Warrant to Search for and to Seize Weapons for Safekeeping</b>																					
<input type="checkbox"/> To any law enforcement officer having jurisdiction - this Order shall serve as a warrant to search for and to seize any issued permit to carry a firearm, application to purchase a firearm and firearms purchaser identification card issued to the defendant and the following firearm(s) or other weapon(s). Describe the weapons to be seized:																					
<ol style="list-style-type: none"> <li>1. You are hereby commanded to search for the above described weapons and/or permits to carry a firearm, application to purchase a firearm and firearms purchaser identification card and to serve a copy of this Order upon the person at the premises or location described as:</li>   <li>2. You are hereby ordered in the event you seize any of the above described weapons, to give a receipt for the property so seized to the person from whom they were taken or in whose possession they were found, or in the absence of such person to have a copy of this Order together with such receipt in or upon the said structure from which the property was taken.</li>   <li>3. You are authorized to execute this Order immediately or as soon thereafter as is practicable:           <div style="display: flex; justify-content: space-between; width: 100%;"> <span><input type="checkbox"/> Anytime</span> <span><input type="checkbox"/> Other: _____</span> </div> </li>   <li>4. You are further ordered, after the execution of this Order, to promptly provide the Court with a written inventory of the property seized per this Order.</li> </ol>																					
<b>Part 2 - RELIEF - DEFENDANT:</b>																					
TRO   FRO   TRO Granted																					
<ol style="list-style-type: none"> <li>1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> No parenting time / visitation until further ordered;</li>   <li><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Parenting time / visitation pursuant to _____ suspended until further order: _____</li>   <li><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Parenting time / visitation permitted as follows:</li> </ol>																					
<ol style="list-style-type: none"> <li>2. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Risk assessment ordered (specify by whom, any requirements, dates):</li> </ol>																					
<ol style="list-style-type: none"> <li>3. <input type="checkbox"/> <input type="checkbox"/> You must provide compensation as follows:           <table border="0" style="width: 100%;"> <tr> <td style="width: 15%;"><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>Emergency support for Plaintiff: _____</td> </tr> <tr> <td><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>for Dependent(s): _____</td> </tr> <tr> <td>N/A <input type="checkbox"/> <input type="checkbox"/></td> <td>Ongoing support for Plaintiff: _____</td> </tr> <tr> <td>N/A <input type="checkbox"/> <input type="checkbox"/></td> <td>for Dependent(s): _____</td> </tr> <tr> <td><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>Compensatory damages to Plaintiff: _____</td> </tr> <tr> <td>N/A <input type="checkbox"/> <input type="checkbox"/></td> <td>Punitive damages to Plaintiff: _____</td> </tr> <tr> <td>N/A <input type="checkbox"/> <input type="checkbox"/></td> <td>to Third Party(ies) (describe): _____</td> </tr> <tr> <td><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>Medical coverage for Plaintiff: _____</td> </tr> <tr> <td><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>for Dependent(s): _____</td> </tr> <tr> <td><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td><input type="checkbox"/> Rent   <input type="checkbox"/> Mortgage payments (specify amount(s) and recipient(s)): _____</td> </tr> </table> </li> </ol>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Emergency support for Plaintiff: _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	for Dependent(s): _____	N/A <input type="checkbox"/> <input type="checkbox"/>	Ongoing support for Plaintiff: _____	N/A <input type="checkbox"/> <input type="checkbox"/>	for Dependent(s): _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Compensatory damages to Plaintiff: _____	N/A <input type="checkbox"/> <input type="checkbox"/>	Punitive damages to Plaintiff: _____	N/A <input type="checkbox"/> <input type="checkbox"/>	to Third Party(ies) (describe): _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Medical coverage for Plaintiff: _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	for Dependent(s): _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> Rent <input type="checkbox"/> Mortgage payments (specify amount(s) and recipient(s)): _____
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<ol style="list-style-type: none"> <li><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> You must participate in a batterers intervention program:</li> </ol>																					
<ol style="list-style-type: none"> <li><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> You are granted temporary possession of the following personal property (describe):</li> </ol>																					
<b>Part 2 - RELIEF - PLAINTIFF:</b>																					
<ol style="list-style-type: none"> <li><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> You are granted temporary possession of the following personal property (describe):</li> </ol>																					
<b>Comments:</b> <div style="height: 40px; border: 1px solid black; margin-top: 10px;"></div>																					

**NOTICE TO DEFENDANT:** A violation of any of the provisions listed in this order may constitute either civil or criminal contempt pursuant to N.J.S.A. 2C:25-30 and may result in your arrest, prosecution, and possible incarceration, as well as an imposition of a fine or jail sentence. Only a court can modify any of the terms or conditions of this court order.

Docket Number	Defendant's Name BETTY SEBROW
Addendum:	
<input type="checkbox"/> TRO denied. Complaint dismissed by Family Part. <input type="checkbox"/> TRO denied by Municipal Court. <input type="checkbox"/> TRO denied by Superior Court Judge at De Novo Hearing. <input type="checkbox"/> TRO granted by Superior Court Judge at De Novo Hearing. The Court has established jurisdiction over the subject matter and the parties pursuant to N.J.S.A. 2C:25-17 et seq., and has found good cause that a prima facie act of domestic violence has been established; that an immediate danger of domestic violence exists and that plaintiff's life, health and well being are endangered; that an emergency restraining Order is necessary pursuant to R. 5:7A(b) and N.J.S.A. 2C:25-28 to prevent the occurrence or recurrence of domestic violence and to search for and seize firearms and other weapons as indicated in this order. <input checked="" type="checkbox"/> TRO granted. The Court has established jurisdiction over the subject matter and the parties pursuant to N.J.S.A. 2C:25-17 et seq., and has found good cause that a prima facie act of domestic violence has been established; that an immediate danger of domestic violence exists and that plaintiff's life, health and well being are endangered; that an emergency restraining Order is necessary pursuant to R. 5:7A(b) and N.J.S.A. 2C:25-28 to prevent the occurrence or recurrence of domestic violence and to search for and seize firearms and other weapons as indicated in this order.	
Date/Time	<input type="checkbox"/> Via Telecommunications
07/15/2021	12:36 PM
Date/Time	<input checked="" type="checkbox"/> Via Telecommunications
Date/Time	<input type="checkbox"/> Via Telecommunications
<b>All Law Enforcement Officers Will Serve and Fully Enforce This Order</b>	
This ex parte Domestic Violence Complaint and Temporary Restraining Order meets the criteria of the federal Violence Against Women Act for enforcement outside of the State of New Jersey upon verification of service of defendant. 18 U.S.C.A. 2265 & 2266	
<b>This Order Shall Remain in Effect Until Further Order of the Court and Service of Said Order on the Defendant.</b>	
<b>Notice to Appear to Plaintiff and Defendant</b>	
1. <input checked="" type="checkbox"/> Both the plaintiff and defendant are ordered to appear for a final hearing on (date) <u>07/22/2021</u> at (time) <u>08:30 AM</u> at the Superior Court. Chancery Division, Family Part, <u>ESSEX</u> County, located at (address) <u>WILENTZ COURT COMPLEX, 212 WASHINGTON ST, 12TH FLOOR, NEWARK, NJ 07102, 973-776-9300 X57210</u>	
Note: You must bring financial information including pay stubs, insurance information, bills and mortgage receipts with you to Court.	
2. <input type="checkbox"/> Remote: All parties shall appear for a hearing on _____ at _____. i. <input type="checkbox"/> Video Remote Hearing is scheduled at the above date and time. You must attend via video as scheduled. Please contact the court for further details at _____. ii. <input type="checkbox"/> Phone Remote Hearing is scheduled at the above date and time. You must attend via Phone as scheduled. Please contact the court for further details at _____. iii. <input type="checkbox"/> Remote Hearing is scheduled at the above date and time. You must attend as scheduled. Please contact the court for further details at _____. iv. <input type="checkbox"/> The proceeding will be conducted on the papers. Please contact the court for details _____.	
3. <input type="checkbox"/> The final hearing in this matter shall not be scheduled until: _____	
4. <input type="checkbox"/> Interpreter needed. Language: _____ Upon satisfaction of the above-noted conditions notify the Court immediately so that a final hearing date may be set.	
<b>IMPORTANT:</b> The parties cannot themselves change the terms of this Order on their own. This Order may only be changed or dismissed by the Superior Court. The named defendant cannot have any contact with the plaintiff without permission of the Court.	
<b>Notice to Defendant</b>	
A violation of any of the provisions listed in this Order or a failure to comply with the directive to surrender all weapons, firearm permits, applications or identification cards may constitute criminal contempt pursuant to N.J.S.A. 2C:29-9(b), and may also constitute violations of other state and federal laws which may result in your arrest and/or criminal prosecution. This may result in a jail sentence.	
You have the right to immediately file an appeal of this temporary Order before the Superior Court, Chancery Division, Family Part, as indicated above and a hearing may be scheduled.	

Docket Number	Defendant's Name <b>BETTY SEBROW</b>				
<b>Return of Service</b>					
<input checked="" type="checkbox"/> Plaintiff was given a copy of the Complaint / TRO by: _____ HANSON PATRICK _____ Print Name _____ Time and Date _____ Signature / Badge Number / Department _____  <input type="checkbox"/> I hereby certify that I served the within Complaint / TRO by delivering a copy to the Defendant personally: _____ _____ Print Name _____ Time and Date _____ Signature / Badge Number / Department _____  <input type="checkbox"/> I hereby certify that I served the within Complaint / TRO by use of substituted service as follows: _____ _____ Print Name _____ Time and Date _____ Signature / Badge Number / Department _____  <input type="checkbox"/> Defendant could not be served (explain): _____ _____ _____ Print Name _____ Time and Date _____ Signature / Badge Number / Department _____					
 The Courthouse is accessible to those with disabilities. Please notify the Court if you require assistance. 					
Distribution:	Family Part,	Plaintiff,	Defendant,	Sheriff,	Other